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CONFIRMATION NO. 8992

|   |   |  |                                   |   |                               |                                    |
|---|---|--|-----------------------------------|---|-------------------------------|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/811,006  | <b>FILING or 371(c)<br/>DATE</b><br>03/26/2004<br><b>RULE</b>   | <b>CLASS</b><br>375                                      | <b>GROUP ART UNIT</b><br>2611     | <b>ATTORNEY DOCKET<br/>NO.</b><br>400.0010.U1(US)   |                               |                                    |
| <b>APPLICANTS</b><br>Michael L. Wilson, West Valley City, UT;<br>Merle L. Keller, Salt Lake City, UT;<br>Vaughn L. Mower, Bountiful, UT;<br>Kent R. Bruening, Sandy, UT;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>06/07/2004 |   |  |                                   |   |                               |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /DON NGUYEN VO/<br>Acknowledged Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR<br/>COUNTRY</b><br>UT | <b>SHEETS<br/>DRAWINGS</b><br>3   | <b>TOTAL<br/>CLAIMS</b><br>23 | <b>INDEPENDENT<br/>CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>K.P. CORRELL AND ASSOCIATES, L.L.P.<br>270 BELLEVUE AVE., #326<br>NEWPORT, RI 02840<br>UNITED STATES  |   |  |                                   |   |                               |                                    |
| <b>TITLE</b><br>System and method for multi-phase composite PN code generation  |   |  |                                   |   |                               |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>910   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                               |                                    |